



Town of Weare
Parks and Recreation Commission (PARC)

**Summer 2016
Youth Swimming Lessons**

PROGRAM DESCRIPTION

- ✓ Swimming lessons are designed to give students a positive learning experience, and to develop swimming and water safety skills.
- ✓ Two 2-week sessions will be held June 20 – June 30 (Fridays are makeup days) and July 25 – August 4 (Fridays are makeup days). Lesson times will be determined by the number of students enrolled and the ability level of the students.
- ✓ Swimming lessons are by ability level. The instructor reserves the right to transfer students to the proper level class, if necessary.
- ✓ Lessons are open to children ages 5 and up. The child must be 5 years old by the start of the enrolled session.
- ✓ The cost of the swim lessons are \$15/child/session for Weare residents, and \$40/child/session for non-residents. Weare residents get preference.
- ✓ Payment is due upon sign-up. **The registration fee is non-refundable.**
- ✓ Sign-ups begin June 7, 2016. Class size is limited. Registration is first come first serve. The child must be enrolled at least 1 week prior to the start of the session, but every effort will be made to accept late registrations.
- ✓ All lessons are to take place at Chase Park at the "Red Cross Stairs", and are 30 minutes in length. Lessons are rain or shine, but will be canceled in the event of thunder or lightening. If in doubt, please call Chase Park to confirm. (529-1866)

What Level Should I Sign My Child Up For?

Level 1 - Introduction to Water Skills

- ✓ My child has little or no experience swimming or lying in the water.
- ✓ In this level, students will learn to submerge their face, learn basic arm and leg action, explore floating, and learn some basic safety practices around the water.

Level 2 - Fundamental Aquatic Skills

- ✓ My child will submerge their face in the water. He/she can float on their front and back with help from me.
- ✓ In this level, students will learn to float independently on their front and back. They will also learn to combine their arm and leg actions to make forward and backward progress in the water.

Level 3 - Stroke Development

- ✓ My child can float by him/herself and make forward and backward progress in the water. He/she knows how to kick and move his/her arms in the water at the same time.
- ✓ In this level, students will learn rotary breathing, how to tread water (in deep water), and how to enter the water head first. They will also learn the basics of several swimming strokes.

Level 4 - Stroke Improvement

- ✓ My child can swim the front crawl and the elementary backstroke. He/she is comfortable in deep water and can tread water.
- ✓ In this level, students will learn different ways to tread water, improve the front crawl and elementary backstroke. They will also learn the breaststroke, butterfly, back crawl and the sidestroke. If possible, they will also learn basic diving techniques.

Level 5 - Stroke Refinement

- ✓ My child is comfortable with all strokes.
- ✓ In this level, students work on coordination and refinement of strokes. They will work to improve the front crawl, back crawl, butterfly, breast stroke, elementary backstroke, sidestroke, and to increase their distances and endurance. Other diving techniques and flip turns will be introduced, if possible.

1. Student's Name: _____

Requested Session: _____ Requested Swim Level: _____

2. Student's Name: _____

Requested Session: _____ Requested Swim Level: _____

3. Student's Name: _____

Requested Session: _____ Requested Swim Level: _____

4. Student's Name: _____

Requested Session: _____ Requested Swim Level: _____

2016 SWIM LESSON REGISTRATION FORM

Please complete one form per participant.

Student's Name: _____

Student's Age _____ (must be at least 5 years old by start of session) ☐ Male ☐ Female

Requested Session: _____ Requested Swim Level: _____

Parent's Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____ texting Y ☐ N ☐

Parent's email: _____

Emergency Name _____ Phone #: _____

List any medical conditions the instructor should be aware of (such as medications, allergies, etc.):

Please list any conditions that may limit his/her/your ability to participate in any activities (ex: hearing, vision, speech, allergies, tubes in ears, etc.) _____

Release of Liability

I/We the parent(s) of _____, permit him/her to participate in all swim lesson activities during the 2016 Swimming Lessons season.

I recognize and acknowledge that there are certain risks of physical injury to participants in the program(s) and I agree to assume the full risk of any such injuries, damages, or loss regardless of severity, which I or my child/ward may sustain as a result of participating in any of the program(s). I hereby fully release and discharge the Town of Weare and its officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me or my child/ward, and arising out, connected with, or in any way associated with activities of any of the programs.

I/We hereby grant permission to the adult managers, teachers, coaches or volunteers to obtain medical care from any licensed physician, hospital or medical clinic for my child at such time as either parent or legal guardian cannot be contacted in person or by telephone.

Signature: _____ **Date:** _____

OFFICE USE ONLY:

Resident: ☐ Y ☐ N

Amount Paid: _____ ☐ Cash ☐ Check **Date Paid** _____